**BAKER BOTTS LLP****RECEIVED**

AUG 03 2001

TECH CENTER 1-800-2900

FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 55)**Complete if Known**

| | |
|----------------------|--------------------|
| Application Number | 09/444,459 |
| Filing Date | 11/22/99 |
| First Named Inventor | Cameron |
| Examiner Name | L. Leary |
| Group Art Unit | 1623 |
| Attorney Docket No. | A31964-072874.0113 |

METHOD OF PAYMENT

1. ☐ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number **02-4377**
Deposit Account Name **Baker Botts LLP**

- ☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17
☒ Applicant claims small entity status. See 37 CFR 1.27

2. ☒ **Payment Enclosed:**

☒ Check ☐ Credit card ☐ Money Order ☐ Other

FEE CALCULATION**1. BASIC FILING FEE**

| Large Entity Fee (\$) | Small Entity Fee (\$) | Fee Description | Fee Paid |
|-----------------------|-----------------------|------------------------|----------|
| 710 | 355 | Utility filing fee | |
| 320 | 160 | Design filing fee | |
| 490 | 245 | Plant filing fee | |
| 710 | 355 | Reissue filing fee | |
| 150 | 75 | Provisional filing fee | |

SUBTOTAL (1) (\$ 0)**2. EXTRA CLAIM FEES**

Total Claims - 20 ** = 0 x = 0
Independent Claims - 3 ** = 0 x = 0
Multiple Dependent =

| Large Entity Fee (\$) | Small Entity Fee (\$) | Fee Description |
|-----------------------|-----------------------|--|
| 18 | 9 | Claims in excess of 20 |
| 80 | 40 | Independent claims in excess of 3 |
| 270 | 135 | Multiple dependent claim, if not paid |
| 80 | 40 | ** Reissue independent claims over original patent |
| 18 | 9 | ** Reissue claims in excess of 20 and over original patent |

SUBTOTAL (2) (\$ 0)

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

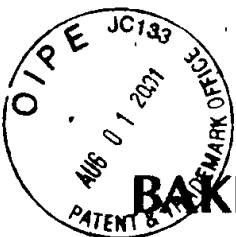
| Large Entity Fee (\$) | Small Entity Fee (\$) | Fee Description | Fee Paid |
|-----------------------|-----------------------|--|----------|
| 130 | 65 | Surcharge - late filing fee or oath | |
| 50 | 25 | Surcharge - late provisional filing fee or cover sheet | |
| 130 | 130 | Non-English specification | |
| 2,520 | 2,520 | For filing a request for <i>ex parte</i> reexamination | |
| 920* | 920* | Requesting publication of SIR prior to Examiner action | |
| 1,840* | 1,840* | Requesting publication of SIR after Examiner action | |
| 110 | 55 | Extension for reply within first month | 55 |
| 390 | 195 | Extension for reply within second month | |
| 890 | 445 | Extension for reply within third month | |
| 1,390 | 695 | Extension for reply within fourth month | |
| 1,890 | 945 | Extension for reply within fifth month | |
| 310 | 155 | Notice of Appeal | |
| 310 | 155 | Filing a brief in support of an appeal | |
| 270 | 135 | Request for oral hearing | |
| 1,510 | 1,510 | Petition to institute a public use proceeding | |
| 110 | 55 | Petition to revive - unavoidable | |
| 1,240 | 620 | Petition to revive - unintentional | |
| 1,240 | 620 | Utility issue fee (or reissue) | |
| 440 | 220 | Design issue fee | |
| 600 | 300 | Plant issue fee | |
| 130 | 130 | Petitions to the Commissioner | |
| 50 | 50 | Processing fee under 37 CFR 1.17(q) | |
| 180 | 180 | Submission of Information Disclosure Stmt | |
| 40 | 40 | Recording each patent assignment per property (times number of properties) | |
| 710 | 355 | Filing a submission after final rejection (37 CFR § 1.129(a)) | |
| 710 | 355 | For each additional invention to be examined (37 CFR § 1.129(b)) | |
| 710 | 355 | Request for Continued Examination (RCE) | |
| 900 | 900 | Request for expedited examination of a design application | |

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid **SUBTOTAL (3) (\$ 55)****SUBMITTED BY**

| | | | | | |
|-------------------|--------------------------|-----------------------------------|----------|-----------|--------------|
| Name (Print/Type) | Michelle LeCointe | Registration No. (Attorney/Agent) | 46,861 | Telephone | 212.408.2631 |
| Signature | <i>Michelle LeCointe</i> | Date | 07/30/01 | | |

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

**BAKER BOTTS LLP****RECEIVED****FEE TRANSMITTAL
for FY 2001**

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$) 180**Complete if Known**

| | |
|----------------------|--------------------|
| Application Number | 09/444,459 |
| Filing Date | 11/22/99 |
| First Named Inventor | Cameron |
| Examiner Name | L. Leary |
| Group Art Unit | 1623 |
| Attorney Docket No. | A31964-072874.0113 |

AUG 03 2001

TECH CENTER 1600 2900

METHOD OF PAYMENT

- 1.
- ☐
- The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number **02-4377**Deposit Account Name **Baker Botts LLP**☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17☒ Applicant claims small entity status. See 37 CFR 1.27

- 2.
- ☒
- Payment Enclosed:**

☒ Check ☐ Credit card ☐ Money Order ☐ Other**FEE CALCULATION****1. BASIC FILING FEE**

| Large Entity Fee (\$) | Small Entity Fee (\$) | Fee Description | Fee Paid |
|-----------------------|-----------------------|------------------------|----------|
| 710 | 355 | Utility filing fee | |
| 320 | 160 | Design filing fee | |
| 490 | 245 | Plant filing fee | |
| 710 | 355 | Reissue filing fee | |
| 150 | 75 | Provisional filing fee | |

SUBTOTAL (1) (\$ 0)**2. EXTRA CLAIM FEES**

| Total Claims | Extra Claims | Fee from below | Fee Paid |
|--------------------|--------------|----------------|----------|
| 20** | = 0 | X | = 0 |
| 3** | = 0 | X | = 0 |
| Multiple Dependent | | | |

| Large Entity Fee (\$) | Small Entity Fee (\$) | Fee Description |
|-----------------------|-----------------------|--|
| 18 | 9 | Claims in excess of 20 |
| 80 | 40 | Independent claims in excess of 3 |
| 270 | 135 | Multiple dependent claim, if not paid |
| 80 | 40 | ** Reissue independent claims over original patent |
| 18 | 9 | ** Reissue claims in excess of 20 and over original patent |

SUBTOTAL (2) (\$ 0)

**or number previously paid, if greater. For Reissues, see above

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

| Large Entity Fee (\$) | Small Entity Fee (\$) | Fee Description | Fee Paid |
|-----------------------|-----------------------|--|----------|
| 130 | 65 | Surcharge - late filing fee or oath | |
| 50 | 25 | Surcharge - late provisional filing fee or cover sheet | |
| 130 | 130 | Non-English specification | |
| 2,520 | 2,520 | For filing a request for <i>ex parte</i> reexamination | |
| 920* | 920* | Requesting publication of SIR prior to Examiner action | |
| 1,840* | 1,840* | Requesting publication of SIR after Examiner action | |
| 110 | 55 | Extension for reply within first month | |
| 390 | 195 | Extension for reply within second month | |
| 890 | 445 | Extension for reply within third month | |
| 1,390 | 695 | Extension for reply within fourth month | |
| 1,890 | 945 | Extension for reply within fifth month | |
| 310 | 155 | Notice of Appeal | |
| 310 | 155 | Filing a brief in support of an appeal | |
| 270 | 135 | Request for oral hearing | |
| 1,510 | 1,510 | Petition to institute a public use proceeding | |
| 110 | 55 | Petition to revive - unavoidable | |
| 1,240 | 620 | Petition to revive - unintentional | |
| 1,240 | 620 | Utility issue fee (or reissue) | |
| 440 | 220 | Design issue fee | |
| 600 | 300 | Plant issue fee | |
| 130 | 130 | Petitions to the Commissioner | |
| 50 | 50 | Processing fee under 37 CFR 1.17(q) | |
| 180 | 180 | Submission of Information Disclosure Stmt | 180 |
| 40 | 40 | Recording each patent assignment per property (times number of properties) | |
| 710 | 355 | Filing a submission after final rejection (37 CFR § 1.129(a)) | |
| 710 | 355 | For each additional invention to be examined (37 CFR § 1.129(b)) | |
| 710 | 355 | Request for Continued Examination (RCE) | |
| 900 | 900 | Request for expedited examination of a design application | |

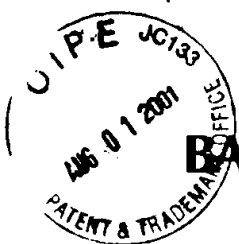
Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 180)**SUBMITTED BY**

| | | | | | |
|-------------------|-------------------|-----------------------------------|----------|-----------|--------------|
| Name (Print Type) | Michelle LeCointe | Registration No. (Attorney/Agent) | 46,861 | Telephone | 212.408.2631 |
| Signature | | Date | 07/30/01 | | |

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

**BAKER BOTTS LLP**Please type a plus sign (+) inside this box → ☐1623

RECEIVED

AUG 03 2001

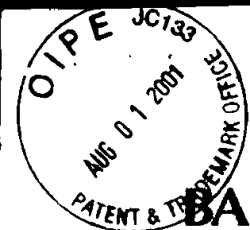
TECH CENTER 1600 2300

| | | |
|--|-------------------------------|--------------------|
| TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i> | Application Number | 09/444,459 |
| | Filing Date | 11/22/99 |
| | First Named Inventor | Cameron |
| | Group Art Unit | 1623 |
| | Examiner Name | L. Leary |
| Total Number of Pages in This Submission | Attorney Docket Number | A31964-072874.0113 |

| ENCLOSURES (check all that apply) | | |
|--|---|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Assignment Papers (for an Application) | <input type="checkbox"/> After Allowance Communication to Group |
| <input checked="" type="checkbox"/> Fee Attached | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input checked="" type="checkbox"/> Amendment / Reply | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Status Letter |
| <input checked="" type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input type="checkbox"/> Other Enclosure(s) (please identify below): |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Terminal Disclaimer | |
| <input type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> Request for Refund | |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> CD, Number of CD(s) _____ | |
| <input type="checkbox"/> Response to Missing Parts/Incomplete Application | Remarks <input type="checkbox"/> | |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | | |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | |
|---|--|
| Firm or Individual name | BakerBotts LLP 30 Rockefeller Plaza New York, NY 10112 |
| Signature | Att Name: Michelle LeCointe PTO Reg: 46,861 |
| Date | 07/30/01 |

| CERTIFICATE OF MAILING | |
|---|-------------------|
| I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: 07/30/01 | |
| Typed or printed name | Michelle LeCointe |
| Signature | |
| Date | 07/30/01 |

**BAKER BOTTS LLP**Please type a plus sign (+) inside this box → ☐

RECEIVED

AUG 03 2001

TECH CENTER 1600 2900

1623

#

**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number

09/444,459

Filing Date

11/22/99

First Named Inventor

Cameron

Group Art Unit

1623

Examiner Name

L. Leary

Attorney Docket Number

A31964-072874.0113

ENCLOSURES (check all that apply)

Fee Transmittal Form



Fee Attached



Amendment / Reply



After Final



Affidavits/declaration(s)



Extension of Time Request



Express Abandonment Request



Information Disclosure Statement



Certified Copy of Priority Document(s)

Response to Missing Parts/
Incomplete ApplicationResponse to Missing Parts
under 37 CFR 1.52 or 1.53Assignment Papers
(for an Application)

Drawing(s)



Licensing-related Papers



Petition

Petition to Convert to a
Provisional ApplicationPower of Attorney, Revocation
Change of Correspondence
Address

Terminal Disclaimer



Request for Refund



CD, Number of CD(s) _____

After Allowance Communication
to GroupAppeal Communication to Board
of Appeals and InterferencesAppeal Communication to Group
(Appeal Notice, Brief, Reply Brief)

Proprietary Information



Status Letter

Other Enclosure(s) (please
identify below):

Remarks

☐**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**Firm
or
Individual nameBakerBotts LLP
30 Rockefeller Plaza
New York, NY 10112

Signature

Att Name: Michelle LeCointe
PTO Reg: 46,861

Date

07/30/01

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: 07/30/01

Typed or printed name

Michelle LeCointe

Signature

Date

07/30/01